



NEW YORK
CANCER HOSPITAL

SECOND AND THIRD
ANNUAL REPORT

1886-1887

Press of
G. P. PUTNAM'S SONS
New York

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*DONORS OF ENDOWED BEDS IN PERPETUITY
BY THE GIFT OF \$5,000 FOR EACH BED.*

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A FRIEND, by CLEMENT CLEVELAND, M.D.

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Mrs. WILLIAM ASTOR.

Mrs. JOHN J. ASTOR.

Mrs. CULLUM.

Mrs. C. P. HUNTINGTON.

*DONOR OF ENDOWED BED FOR TWO LIVES BY
THE GIFT OF \$4,000.*

Miss SUSAN M. EDSON.

CHAPTER 429.

An Act to incorporate the New York Cancer Hospital. Passed May 31, 1884,
by a two-third vote.

The People of the State of New York, represented in Senate and Assembly, do
enact as follows :

SECTION 1.—Elizabeth H. Cullum, Phoebe Lord Day, Annie R. Dahlgren,
Justine Van R. Townsend, S. Matilda Clarkson, John E. Parsons, Henry E.
Pellew, Joseph W. Drexel, Richard T. Auchmuty, George P. Andrews, Wil-
liam T. Bull, Clement Cleveland, James B. Hunter, George L. Peabody, and
Francis P. Kinnicutt, and their successors, are hereby constituted a corporation
or body corporate by the name and style of the New York Cancer Hospital, the
object of which shall be to establish, maintain, and conduct a cancer hospital
in this State. The corporation shall have perpetual succession as such.

§ 2.—The property and concerns of the corporation shall be managed
by a board of managers. The first board shall consist of the fifteen persons
above named. The board may from time to time, by a vote of not less than
two thirds of its members, to be recorded in its book of minutes, increase or
reduce the number of the board. At least five of the managers shall be physi-
cians or surgeons. The others shall one half be male and the other half be
female managers. The managers shall hold office for one year, or until such
further time as their successors shall be appointed. The board shall fill all
vacancies, and it shall appoint its own officers.

§ 3.—The corporation is authorized to take by purchase, devise, bequest,
or otherwise for its purposes, any real or personal property, and to hold, trans-
fer, and convey the same.

§ 4.—The corporation is hereby vested with the general powers of corpora-
tions, and with such further powers as are requisite to carry out its object ; and
it shall be entitled to such other benefits and advantages as are or shall be con-
ferred by any laws relating to religious, benevolent, or charitable institutions.

§ 5.—No less than two thirds in number of the managers shall constitute a
quorum for the purpose of electing managers and officers, making by-laws,
appointing physicians or surgeons, and authorizing the sale of real estate. The
by-laws may prescribe how many shall constitute a quorum for all other purposes.

§ 6.—The corporation is authorized to take by purchase, devise, bequest,
or otherwise for its purposes, any real or personal property, and to hold, trans-
fer, and convey the same. The property of the corporation used for its pur-
poses and from which no income is derived shall be exempt from taxation so
long, and only so long, as it is used exclusively for charitable purposes, and so

long as it affords gratuitous treatment to those who comply with its rules but are unable to pay for such treatment.

§ 7.—This act shall take effect immediately.

STATE OF NEW YORK, }
Office of the Secretary of State. } ss.

I have compared the preceding with the original law on file in this office, and do hereby certify that the same is a correct transcript therefrom, and of the whole of said original law.

JOSEPH B. CARR, *Secretary of State.*

NEW YORK CANCER HOSPITAL.

SECOND AND THIRD ANNUAL REPORT.

WHEN the First Annual Report was issued in 1885, it was expected by the Managers that the building for female patients, provided by the generosity of Mr. John J. Astor, would be completed and ready for occupancy by October of the same year. The long delay in opening the Hospital has been due to two causes: 1st, the necessity of erecting two additional buildings, one for mortuary purposes, and a larger one to contain a boiler-house, a laundry, and dormitories for servants; 2d and mainly, the difficulty of establishing proper sewer connections. To avoid considerable expense, it was deemed best to wait for the completion of a sewer by the Department of Public Works in Eighth Avenue, a work which was not finished until late in November, 1887, on account of the extensive blasting required. On December 6, 1887, the Astor Building was formally opened with appropriate exercises, a full report of which will be found in the Appendix. Patients were received on the following day, and two of the wards were filled within the first month.

The accompanying report by the architect, Mr. Charles C. Haight, renders a full description of the Hospital building unnecessary here, but two features are worthy of special notice.

First, the admirable system of ventilation—a point of vital importance in a building designed for the treatment of a class of diseases in which purity of air is essential. It has been found by experiment that the air of each ward can be changed completely, with closed doors and windows, every five minutes, without production of annoying and dangerous draughts. In one of the wards, which has been devoted to the treatment of the most

offensive cases, we have succeeded by the aid of thorough disinfection and rapid change of air in securing almost absolute freedom from unpleasant odors.

Second, the circular form of the wards. The New York Cancer Hospital is the first hospital building erected in this country with circular wards. This form has been adopted abroad in the large Stuyvenberg Hospital, with four hundred beds, in Antwerp, and also in the Miller Memorial Hospital, Greenwich, and Hampstead Hospital, England, and is believed to be superior in many respects to the usual parallelogram shape. In a memorandum on a plan for the construction of a hospital with circular wards, by Mr. Ingress Bell and Major-General Sir Andrew Clarke, they observe that the circular form "is the logical result of attempts to improve the sanitary condition of wards of the ordinary construction by rounding off their internal angles. By degrees the quadrants have been struck off with ever increasing radius; and this proceeding strengthens the view that the ultimate solution of the problem lies in the adoption of the circular form." Our own experience thus far has shown that for wards forty feet in diameter, built in towers, with accommodations for thirteen patients in each ward, the circular form presents unquestionable advantages. Ample light is secured by the exposure on three sides of the ward; the absence of angles and corners promotes cleanliness; the patients are under the immediate observation of the nurse in centre of the ward to a degree impossible with the parallelogram form; the radiate arrangement of beds permits ampler space between the heads of the beds; the more ready access to the patients saves much labor on the part of the nurses; and lastly, but not less important, the very cheerful aspect of wards of this construction is not without value in depressing illness.

The Managers desire to call attention to the rule which has been adopted for the admission of patients, viz., that all persons suffering from cancer are eligible for admission whose condition admits of cure or *relief*, on approval by one of the medical officers of the Hospital. Cases not suitable for operation are not excluded, provided there be a reasonable prospect of relief by other measures. It is hoped that this statement will correct the impression which seems to have prevailed that only cases requiring a surgical operation are admitted.

The design of the Hospital building contemplates an addition to

the present structure to accommodate male patients, and to contain a chapel in memory of Mrs. Cullum, whose name is closely identified with the foundation of this charity. Funds for the chapel have been provided by the property in San Francisco devised by Mrs. Cullum, and it is hoped that they will soon become available. Wards for male patients are urgently needed, and the Managers trust that the means for thus completing the work of the Hospital will be supplied by the generosity of the public.

Since the last Annual Report several large donations have been received : \$25,000 from Mr. John J. Astor for furnishing the Hospital ; \$5,000 for building purposes from Mrs. Mary Rogers, in addition to a previous gift of \$25,000 ; \$5,000 from Mrs. Stillman A. Clark to endow a bed in perpetuity ; \$5,000 from a Friend, through Dr. Clement Cleveland, to endow a bed in perpetuity ; and \$4,000 devised by Miss Susan M. Edson to endow a bed for two lives. As this report is going to press another generous gift of \$25,000 from Mr. John J. Astor has been received, to endow five beds in memory of his wife, Caroline Augusta Astor. A large number of engravings for decorating the halls have been given by Mrs. R. L. Stuart. Various smaller donations are acknowledged on a subsequent page.

On December 12, 1887, less than a week after the opening of the Hospital, the institution lost a warm friend by the death of Mrs. John J. Astor. Though not connected officially with its management, Mrs. Astor manifested an active interest in its welfare. A memorial notice of her will be found in the Appendix.

The New York Cancer Hospital is now in successful operation. It supplies for a class of cases hitherto inadequately provided for, accommodations unequalled by those of any similar institution in the world. The current expenses will necessarily be large, and to meet them the Hospital has no resources at present except the income from the endowed-bed fund and the weekly payments by patients, a large proportion of whom are admitted free. The total income from these sources will cover only a small part of the indispensable charges, and must be supplemented by liberal contributions from the friends of the Hospital. The Managers feel that the New York Cancer Hospital has special claims upon all who are interested in the proper care of the victims of this terrible disease, and may reasonably hope that liberal gifts and bequests will be made to carry on the work begun so auspiciously.

REPORT OF THE ARCHITECT.

Architect, Mr. Charles Coolidge Haight.

Style, French Gothic, built of Belleville sandstone and red pressed brick.

The Astor Pavilion has accommodation for seventy patients, and contains the administration offices, surgeons' and nurses' living rooms, the kitchen, and an operating theatre.

The basement or cellar, partly above ground, is well lighted and is arranged as a heating chamber for the building. Fresh air, brought from an opening ten feet above the level of the yard, is drawn through steam coils arranged in sections and forced by means of a powerful fan into every part of the cellar. Supplementary coils placed at the base of each hot-air pipe enable the engineer to adjust the temperature of each room separately. The large wards arranged for thirteen beds are circular, forty feet in diameter, and are placed in the corner towers. Fresh air is introduced in the outside walls at openings between the windows, and the vitiated air removed through an iron column in the centre of the apartment. The dining rooms and the private rooms have open fireplaces with mantelpieces of iron and glazed tile.

The kitchen is placed in the fourth story, and is connected by dumb-waiter with the pantries of the dining rooms on the floor below.

A large hydraulic elevator gives easy access to the different stories, and a smaller one is arranged for freight and supplies.

The floors of bath-rooms, lavatories, etc., are formed of large slabs of slate resting on moulded iron beams. The drain pipe, supply pipes, and traps are exposed in every part, and are easily accessible for inspection.

The convenient and compact arrangement, the well-lighted corridors and staircase, the abundance of sunlight and fresh air, the simple and successful system of heating, of ventilation and plumbing, and the adoption of the circular instead of the rectangular form of ward, mark a new departure in hospital construction, and make this admirable building a model of its kind.

The corporation has also erected on the property a detached building for boiler house, laundry, and servants' dormitories. Also a small mortuary.

TREASURER'S REPORT.

JOS. W. DREXEL, TREASURER, *in account with NEW YORK CANCER HOSPITAL.*

1885.		1886.	
May 1.—To Cash on hand as per last report	\$156,239 83	May 1 to	\$15,682 10
Donations	26,037 84	1887. { By Payments on account of building	{ \$92,100 20
Interest	2,704 03	May 1.	1886. {
Sale Cullum lots	23,559 33	Interest	1,080 00
Unexpended balance, annual report ^a	31 55	Sundries	710 58
Cullum property, San Francisco	1,000 00	Transfer to bed fund	115,682 10
	<u>\$209,572 88</u>	Balance	
			<u>\$209,572 88</u>
			<u>—</u>
May 1.— To Cash on hand	\$15,682 10	May 1 to	\$74,013 90
May 1 to		1887. { By Payments on account of building	
1887. {		May 1.	
May 1.		Interest	1,080 00
		Sundries	285 00
		Transfer to bed fund	44,950 00
		Transfer to furniture account	25,000 00
		Balance	6,884 00
			<u>\$151,312 90</u>
			<u>—</u>

1888.
Feb. 17.

New

NEW YORK, February 18, 1888.

JOS. W. DREALL, *News.*
Per W. B. Wilbank.

We have examined the above report of the Treasurer, together

with the vouchers, and find it to be correct.

GEORGE P. ANDREWS,
FRANCIS P. KINNICUTT,
} Committee.

JOS. W. DREXEL, TREASURER, in trust, in account with NEW YORK CANCER HOSPITAL "Bed Fund."

New York February 18 1888

We have examined the above report of the Treasurer, together with the vouchers and find it to be correct.

THE BOSTONIAN

GEORGE F. ANDREWS,
FRANCIS P. KINNICUTT,
Per F. P. K.
Committee.

NEW YORK, February 18, 1888.

Per W. B. Wiltnbank

JOS. W. DREXEL, TREASURER, in trust, *in account with* NEW YORK CANCER HOSPITAL "Furniture Fund."

	1887.	1887.
March 5.—Donation	\$25,000 00	March 5 to } By Payments for elevator, waiter, furni-
1888.		ture, 1888. etc.
Feb. 17.—Interest to date	948 90	Feb. 17.
		Balance
		I,300 53
		<hr/> \$25,948 99
		<hr/>
1888.		
Feb. 17.—To Balance	\$1,300 53	

NEW YORK, February 18, 1888.
 JOS. W. DREXEL, *Treas.*
 Per W. B. Wiltsbank.

NEW YORK, February 18, 1888.
 We have examined the above report of the Treasurer, together
 with the vouchers, and find it to be correct.

GEORGE P. ANDREWS,
 FRANCIS P. KINNICKUTT, *Committee.*

CASH SUBSCRIPTIONS TO THE NEW YORK CANCER HOSPITAL TO
FEBRUARY, 1888.

Mr. John J. Astor . . .	\$250,000	Mrs. C. A. Peabody . . .	100
Mrs. Mary Rogers . . .	30,000	" Anna F. Jaffray . . .	100
" R. L. Stuart . . .	25,000	Mr. Jno. A. Robinson . .	100
" John J. Astor . . .	20,000	" Jno. W. Hamersly . .	100
" Cullum	15,000	Proceeds of amateur per-	
Mr. John E. Parsons . . .	5,000	formance through Dr.	
Mrs. William Astor . . .	5,000	Hunter	80
Mr. H. O. Armour . . .	5,000	Miss E. C. Jay	50
" Isador Cohnfield . .	5,000	" Furniss	50
Mrs. C. P. Huntington . .	5,000	" M. D. Smith	50
Mr. Morris K. Jesup . .	5,000	" D. N. Platt	50
" Joseph W. Drexel . .	5,000	Mr. G. E. Clark	50
Mrs. Stillman A. Clark . .	5,000	Mrs. K. Campbell	50
A friend by Dr. Cleveland .	5,000	Miss Susan M. Edson . .	50
Miss Susan M. Edson . . .	4,000	" Mary A. Edson . . .	50
H. G. Marquand	1,000	M. B. Brown	50
Mr. Horace Way	1,000	Mrs. E. V. Clarkson . . .	25
" D. Willis James . . .	1,000	" Clement Livingston . .	25
" S. Inslee	1,000	" J. H. Mortimer . . .	25
" Julien T. Davies . .	1,000	Miss Hamilton	25
Mrs. Susan Anetta Gibbes .	1,000	" Alice Hamilton . . .	25
Messrs. Park & Tilford . .	500	" Adelaide Hamilton . .	25
Mr. W. S. Warner . . .	500	Mrs. Fred. Bronson . . .	25
" H. B. Hyde	250	" Eugene Kelly	20
Mrs. Edward King	250	" George Bird	20
Mr. Henry E. Pellew . .	200	St. Thomas' Bible Class .	12
Mrs. H. B. Van Auken . .	200	Mrs. J. A. Roosevelt . .	10
G. A. Dockstader	200	" R. M. Pell	10
Est. E. D. Morgan . . .	170	" H. E. Pierrepont . .	10
Mrs. H. Townsend	150	" E. H. Kendall	5
" Daniel Le Roy	100	Miss Thomas	5
" E. M. Brown	100	" S. F. Jones	5
A friend through Mrs. Clarkson	100	Mrs. Wistar	5
Mr. Royal Phelps	100	P. J. Joachimson	5
" B. H. Field	100	Donations of received bills	
" M. Clarkson	100	for services from :	
" W. R. Travers	100	Mr. V. K. Stevenson . .	1,000
		Messrs. Beekman & Ogden,	500

REGULATIONS.

ADMISSION OF PATIENTS.

ARTICLE 1. All patients suffering from cancer, whose condition admits of cure or relief, shall be admitted by the Superintendent with the approval of one of the Medical Officers of the Hospital.

ARTICLE 2. After admission the patients shall be assigned in rotation to the Surgeons and Physicians on duty, unless they bring a card signed by one of the Attending Staff, in which case they shall be assigned to his service, if so desired by him.

ARTICLE 3. If, on admission, patients express a preference for the service of a given surgeon or physician, they shall be assigned accordingly, unless there is some good reason for doing otherwise.

ARTICLE 4. No transfer of patients from one service to another shall be allowed without the consent of both the Surgeons or Physicians concerned.

ARTICLE 5. Patients may apply for admission at the Hospital between the hours of 10 A.M. and 4 P.M. daily.

ARTICLE 6. Patients who are too ill to present themselves in person will, on proper application, be visited and examined by one of the Medical Officers of the Hospital.

ARTICLE 7. Patients living out of town should submit to the Superintendent an application in writing, accompanied by a statement of their case by some responsible physician, before presenting themselves at the Hospital.

ARTICLE 8. Visitors to patients will be admitted daily between the hours of 11 A. M. and 12 M., or between 4 and 5 P. M. Relatives of patients may be admitted at other hours by permission of the Superintendent.

ARTICLE 9. All food, delicacies, and stimulants intended for patients must be left at the Superintendent's office, and will be delivered to patients only on the order of the House Surgeon.

ARTICLE 10. The charge for board in the wards and private rooms shall be at rates fixed by the Executive Committee. These rates will include all expenses except those of a special nurse. All charges may be remitted in whole or part by the Executive Committee, or in the intervals of its meetings, by the Superintendent.

ARTICLE 11. All payments shall be made weekly, in advance. The day of entering and the day of leaving shall be counted as full days.

At present the charges for board are : \$7 per week for patients in the wards ; \$20 per week for patients occupying single private rooms ; and \$15 per week for patients occupying double private rooms.

APPENDIX.

APPENDIX.

The New York Cancer Hospital was opened with formal ceremonies on Tuesday, December 6, 1887, at three o'clock in the afternoon. The President, Mr. John E. Parsons, presided.

As no room in the building was large enough for the purpose, the exercises were held in the spacious hall on the second floor, which was filled to overflowing into adjoining apartments. The large attendance was a gratifying manifestation of the interest shown in the work of the hospital. Besides those attracted by the opening of the first hospital in this country, and the second in the world, devoted exclusively to patients afflicted with cancer, there were not a few present who were especially interested in the novel and admirable features of hospital construction described in the earlier part of this report.

The exercises were opened with prayer by Rt. Rev. H. C. Potter, D.D., and reading of Scriptures by Rev. William F. Morgan, D.D., after which the choir of St. Thomas' Church sang the Hospital Hymn, composed by Rt. Rev. A. C. Coxe, D.D. :

Father, who mak'st Thy suff'ring sons
Thy ministers to stronger ones,
To light love's holy flame within,
Deposing self, abasing sin,
O teach my soul, confiding still,
To suffer or to do Thy will !

If in this world of mystery,
Unequal favors fall on me,
While brothers, better far than I,
Are called to languish or to die,
Help me in turn their ills to share,
Their wounds to heal, their load to bear.

Blest is their task, 'mid human woe
Thy gifts on others to bestow ;
For suffering lies at plenty's door,
And God appeals when cries the poor,
His law ordains, for all that live,
What sorrow lacks let mercy give.

The day shall come when veils remove,
 And all shall know that God is love.
 Then He himself all tears shall dry,
 And show of pain the reason why,
 And theirs shall be the great reward
 Who in His poor beheld their Lord.

After the singing of the hymn, the following opening address was made by John E. Parsons, Esq., President of the Board of Managers.

ADDRESS OF MR. JOHN E. PARSONS.

To me belongs the agreeable duty of welcoming those who honor this occasion by their presence. After many disappointments and disheartening delays, the Astor Pavilion of the New York Cancer Hospital is ready for the use for which it has been constructed. In the First Annual Report of the Hospital it was stated that by October, 1885, the building would be completed and ready for occupation. It is unnecessary to refer to the causes which prevented the fulfilment of that expectation. The obstacles have at last been removed, and to-morrow the Hospital will be ready to receive patients.

I must be permitted to express my gratification, and that of the Trustees, both at the appearance and at the internal arrangement of the building. No greater compliment could be paid to it than the criticism which has been made against it. It has been spoken of as a costly building. Its construction has involved the expenditure of a considerable sum of money. The outlay for the Astor Pavilion proper has been about \$200,000. That was the amount of Mr. Astor's gift. An additional \$25,000 was received from Mr. Astor for furniture. The entire cost of the building as it stands, furnished, ready for use, may be called \$225,000. The building has a total front on Eighth Avenue of 137 feet; its extreme depth on 106th Street is 108 feet. I think that any one who is acquainted with the expense of building will say that for these dimensions it would be difficult to put up a building with the plainest possible exterior, the cost of which would be materially less.

The success of the exterior is in its attractive appearance. For this we are particularly indebted to Mr. Haight, our architect. We think that the interior of the building is equally a success. Its distinctive feature may be said to be in its circular wards. The object in adopting that form was, that it gives a maximum of light, and it avoids corners in which may lurk the seeds of disease. The object throughout the building has been to furnish the largest exposure to light and air. We think that this object has been successfully attained.

This building, however, is but a beginning. Upon the ground to the south and west additional buildings will be erected as the money is provided. This pavilion is only for the accommodation of women. We need immediately a building for the treatment of male patients. The situation of the property, opposite the Central Park, is such as to permit the largest part of the site to be occupied by buildings. It is in immediate contemplation to extend the present structure to the south. I hope that the necessary expense will be provided from the San Francisco property which came to the Hospital by the will of

Mrs. Cullum. The distinguishing feature of that building will be a chapel in her memory.

I think that the Trustees are to be congratulated for the wisdom which prompted them to select this site. The land was purchased just before the recent advance in value. I doubt if at twice the expense it would be possible to-day to make a similar purchase. The selection of the Leake and Watts property for a new cathedral has assured the future of this part of the city. It is inevitable that not only shall a large population quickly move into the section which lies between the Central and the Riverside Parks, but that the character of the improvements will correspond with buildings like this.

It may be in the minds of some that the name by which the Hospital is known is objectionable both in its effect upon the neighborhood and upon the future success of the Hospital itself. I cannot see why this should be so. The Hospital is for the treatment of cancer. Our hope is that the experience which will be furnished here will lead to new and successful modes of dealing with the disease. Recent events have created exceptional interest in it. I must believe that in the future some mode of treatment will become known which may strike at the roots of the disease, and if it does not extirpate it may at least ameliorate the condition of the patient beyond that which is possible in the present condition of medical knowledge upon the subject, and with this will disappear the prejudice against the name. It is but a prejudice.

I cannot close without saying a few words about the financial condition of the Hospital. It is in that situation which is and which should be chronic with all benevolent institutions. It needs money for the indebtedness which has been incurred in the purchase of additional land and the erection of a laundry building. It needs money for an additional pavilion to be used for the treatment of male patients in connection with this building. From this time on it needs the necessary funds to carry on its active operations. Our success of the past has been so great that I feel confident that the liberality of the citizens of New York will furnish the money which is required.

This occasion is not altogether joyous. Mingled with the gratification which it inspires is the thought that Mrs. Cullum, to whom the institution owes every thing, has not lived to see this day. And Mrs. Astor, without whose liberal sympathy, and that of Mr. Astor, this building would not have been erected, is unable to be with us. I only echo the thought of all in expressing the hope that her valued life may be spared and her health restored, and that New York may continue to benefit by her large-hearted and generous work and sympathy.

General Cullum was then called upon, and made the following response in behalf of the Founders of the Hospital.

ADDRESS OF GENERAL CULLUM.

MANAGERS OF THE CANCER HOSPITAL :

LADIES AND GENTLEMEN—I have often said that I would rather brave a battery of artillery than attempt a speech in face of a peaceful company of men and women. But your pertinacious President, who finds it very easy for *him* daily to address “the gentlemen of the jury,” is not to be put off, and insists

upon my saying a few words in behalf of Mrs. Cullum, one of the Founders of this Hospital. To her sacred memory I can refuse nothing.

Years ago, with a warm heart ever earnest in good works, she proposed the erection of cancer-wards in connection with the New York Woman's Hospital, of which she was then the Vice-President. Her zealous efforts proving unavailing, she turned her attention to securing a separate establishment for the cure and treatment of unfortunates afflicted with this scourge of humanity. How incessantly she toiled in the prosecution of this praiseworthy object, you all well know. I can answer that her whole soul was bent upon the accomplishment of this labor of love, and how greatly she rejoiced that generous givers had contributed a sufficient sum to justify the Managers of this institution in purchasing an eligible site and building this stately pile—the ASTOR PAVILION, justly so called in honor of the munificent donor of the funds necessary for its erection. Its beauty of design and adaptation to its purposes speak eloquently for its contrivers.

Though it resembles a Roman stronghold or feudal castle, it is not the lordly dwelling of a cruel chieftain tyrannizing over his horde of vassals, but a luxurious home for the subjects of a dire disease to be treated with the tenderest care. One might have traversed the Roman empire in the zenith of its power, from the Atlantic's shore to the banks of the Euphrates, without meeting a single charitable asylum; and though, early in the third century, hospitals for invalids were instituted by Indian Buddhists, it was reserved for Christianity to multiply, endow, and perfect them. In the fourth century the Empress Helena, mother of Constantine the Great, founded in the chief cities of her realm hospitals and institutions of benevolence. In this good work she was followed by many high-born ladies, the hearts of women being naturally open to sympathy for the suffering. But, noble as were these charities, they labored under an essential defect in having substituted for educated physicians well-meaning but unskilled ecclesiastics. These infirmaries, however, were more of the character of hospices than of modern hospitals for the care of the sick and infirm, now so common throughout the civilized world, and nowhere more than in this commercial capital have these asylums of beneficence aided to remove the canker of care and heal the sharpest stings of adversity. To-day we add another home for the unfortunate, in this building, the corner-stone of which, three and a half years ago, Mrs. Cullum was deputed to lay, in consideration, said your President, that "the success which had thus far attended the effort to establish a Cancer Hospital was due, more than to any other single cause, to her zeal, her untiring energy, and efficient labors."

Those of you who were present at that interesting ceremony can recall her commanding presence, her graceful bearing, and lustrous eye beaming with benevolence and triumph that at last the seal was set to her heart's longings of many years.

With her little remainder of life she relaxed no effort for the accomplishment of the philanthropic purpose you, her fellow-workers, have this day achieved. Even when that noble heart ceased to beat, and the light of that brilliant intellect had gone out, her benefactions for suffering humanity continued to live on. By her will she left all her landed property in this city of

her birth and her ample homestead on the peaceful shore of the Pacific to this hospital.

Though much of the great work has been effected in the erection of this beautiful edifice, far more remains to be done in the tender care and treatment of the poor sufferers soon to tenant these spacious wards, with health gone, happiness waning, and hope almost extinct. I well know that the present Managers—both ladies and gentlemen—will, in the future as in the past, do all in their power for the eradication of this upas poison of the body, which has heretofore baffled surgical skill, and is to-day the *opprobrium medicorum*. For a time its treatment will doubtless have its ebbs and flows of failure to-day and some success to-morrow, yet the stream of knowledge will flow on, continually multiplying the resources of the medical profession, and I trust that this Hospital may bring forth some genius, like Harvey or Jenner, to join the immortals and leave a monument of gratitude in the hearts of thousands yet unborn. And I further trust that its future management and history may disprove the reproachful words of the learned Buckle, who says, in "his History of Civilization in England," that "if we examine the effects of the most active philanthropy, and of the largest and most disinterested kindness, we shall find that those effects are, comparatively speaking, short-lived ; that there is only a small number of individuals they come in contact with and benefit ; that they rarely survive the generation which witnessed their commencement ; and that, when they take the more durable form of founding great public charities, such institutions invariably fall, first into abuse, then into decay, and after a time are either destroyed, or perverted from their original intention, mocking the effort by which it is vainly attempted to perpetuate the memory even of the purest and most energetic benevolence."

As opposed to these gloomy predictions of a profound thinker, I would, in conclusion, add the more cheerful saying of Dryden :

" Many things impossible to thought
Have been by need to full perfection brought."

Then followed an address on the opening of the New York Cancer Hospital by Fordyce Barker, M.D., LL.D.

ADDRESS OF DR. FORDYCE BARKER.

The opening of a new Hospital in this city, the first in this country and the second only in the world, devoted exclusively to the treatment of cancer, is an event of such importance that I greatly regret that the selection of a person to give the address had not fallen upon one more competent to do justice to the occasion. But some considerations have been forced upon me, which seem to make it an imperative duty to accept the position and throw myself on your kind indulgence.

One inducement which had its weight on my mind is the fact that I do not profess to be a surgeon, and as the wonderful progress made within the past decade, in the successful cure of many cases of cancer which before would have been left to die a miserable death, has been in the domain of surgery and the

result of surgical proceedings, I can speak of these without any imputation of self-laudation.

My purpose is simply to show the necessity for and the usefulness of such an Hospital—to impart some knowledge of the nature of this terrible disease, cases of which will seek relief and cure within these walls,—and to correct some popular errors in regard to it which seem to be almost universal, and which the profession well know have caused an incalculable amount of unnecessary misery and unhappiness in the world. It is to be confidently hoped that the good which this Hospital will eventually accomplish in the relief of unhappiness and suffering will be represented only in a minor degree by its future inmates, but will extend to many thousands who will never be within its walls.

As preliminary to what I am about to say, I may be permitted to define some words which are in general use by the public in a sense quite different from their professional use. The word tumor when applied to any abnormal enlargement in any part of the system is one which carries terror to the minds of most patients, who often consult their physician because of an avowed apprehension that they have a tumor.

The word tumor is nearly but not exactly identical with the word swelling, and carries to the professional mind no significance as necessarily implying danger to life. We speak of glandular tumors, fatty, cellular, or fibrous tumors, as innocent, or benign, meaning thereby that they are purely local growths having no tendency to extension by formation of other growths, and that if removed they are gone forever. But we also have what are called malignant tumors, which involve a destructive degeneration and gradual invasion of adjacent tissue, and which may finally infect the general system and destroy life.

Cancer, using the term in a general sense, is a typical form of malignant tumor. It is probable that this was first observed and studied as an external disease. The name is said to have been given to this affection by Galen, who lived in Rome in the latter part of the second century, a physician of great eminence, and one of the most accomplished and learned men of his age. From a fancied resemblance of the appearance of the disease as it extends itself into adjacent healthy tissues to the claws of a crab, he gave it the Latin name of Crab, namely Cancer. Since his day the name has been universally adopted both by the medical profession and the public, and is popularly applied to all forms of the so-called malignant growths, such as scirrus or hard cancer, encephaloid or brain-like cancer, epithelioma, the rapidly growing, infecting, and recurrent forms of sarcoma, and other varieties, which may differ much in structure, and in their clinical features.

The malignancy which is the common characteristic of all, justifies the long-continued popular usage of the term cancer to cover all these diseases, and all come within the province of this Hospital to treat. I will briefly refer to some of the peculiarities of this group of diseases which distinguish them from all others. They have for some years been gradually increasing in frequency and causing a larger proportion of deaths in those nations which are the most advanced in civilization.

In the Forty-first Annual Report of the Registrar-General of England, published in 1880, it was asserted that the number of deaths from cancer was 5,218

in 1851, and 12,664 in 1878, but as the population had largely increased in this period, the increase in frequency will be more distinctly appreciated by the following quotation from this report : " The average annual mortality (from cancer) during the five years 1850-4 was 304 in one million living. In the five years 1870-4 it was 443, while in the year 1878 it was 512."

In New York City, the proportion of deaths from cancer in 1875 was 400 to the million. In 1885 it was 530 to the million. According to the Reports on Vital Statistics of the Census of the United States of 1880 the proportion of deaths from cancer to the total number of deaths reported from known causes was 36.68 to 1,000.

Cancer is a disease of advanced age. It is found in all ages but in very unequal proportions. In 8,193 cases the proportion of deaths under 5 years of age was 15.95 per 1,000, while from 5 to 10 it is only 2.82 per 1,000, and from 10 to 15 1.60 per 1,000. From the age of 15 the proportion gradually rises in each quinquennium, until between the ages of 50 and 55 it reaches 130.18 per 1,000. After this period the proportion gradually diminishes as the population of those living after this period of life decrease. Mr. Jonathan Hutchison, of London, whose opinion on all questions of pathology is considered authority by the profession in all parts of the learned world, in the most able discussion which has ever been held on this subject, that before the Pathological and Clinical Society of Glasgow in 1886, said : " Of the causes which underlie the proclivity to cancer, and which render some races and some families more prone than others, we as yet know but little. What little we do know would lead us to believe that it has nothing to do with diet or with climate. The herbivorous animals are liable to it as well as the carnivorous, and so far as I know it prevails in all parts of the world where the conditions are favorable to longevity. Wherever, from whatever cause, they are not so, there cancer becomes relatively infrequent. It is almost unknown in those of our domestic animals which are used for food, for the simple reason that we never let them grow old, while in dogs, cats, horses, and asses it is common,"

Dr. Billings says : " The increase of mortality from cancer with advancing age may be explained either on the theory that the cause of cancer becomes more potential in advanced age at the period of physiological decay, or on the theory that the predisposition to cancer belongs to the strongest and longest lived." The fact is settled beyond question, that in those populations where but few reach old age, cancer is proportionally rare.

There are some curious and interesting facts in regard to the geographical distribution of cancer, which science as yet does not satisfactorily explain.

The last census of the United States demonstrates that this disease is especially prevalent in the New England States and on the Southern Pacific coast, that it is prevalent in New York, Pennsylvania, Ohio, and in the interior of Michigan and the southern part of Wisconsin. That it is least prevalent upon the Mississippi and in the South, and that the proportions are generally lower in the coast regions than in the interior. An examination of the reports of death from cancer in England and Wales made by Dr. Havilland leads him to conclusions quite in accord with those derived from our own census. Both banks of the Tweed near Berwick, and of the Tyne at Newcastle, some parts

of Yorkshire, and the whole of the beautiful lake district are fertile beds of cancer. The Isle of Wight is all but free from this disease, while it is common in Brighton, Folkestone, Dover, Ramsgate, and Margate. Statistics also demonstrate, as other facts have seemed to prove, that density of population, poor living, and laborious toil have very little to do with the development and appearance of cancer. Thus in London, in which, as a whole, cancer is very prevalent, the parish of St. Luke's, the neighborhood of Bishopsgate Street, crowded Bethnal Green, the Isle of Dog, Rotherhithe, and Bermondsey, are almost exempt from this disease, but in the respectable parts of the metropolis, about the Marylebone Road, Regent's Park, and Primrose Hill it is exceptionally frequent. In Liverpool, which has a large mortality from other causes of death, the percentage of deaths from cancer was very small. In the future it may be discovered that the localities where the prevalence of this disease is most frequent, they have certain characteristics in common which science may overcome and thus notably diminish this tendency in such localities.

In the Report on the Vital Statistics of the United States of the Tenth Census in 1886, it is remarked that the peculiarities of the differences in mortality from cancer in different localities may be in part explained by differences in the population of these localities as regards race and age. It is a disease which is much less frequent in the colored than in the white race, hence the mortality from it is greater in the North than in the South. It causes the greatest proportion of deaths where there are the greatest proportion of people of advanced age,—that is to say, in the New England States. Hence in any given locality, a large proportion of deaths from cancer indicates, to a certain extent, that the locality is a healthful and a long-settled one and has a large proportion of inhabitants of an advanced age.

Cancer is not a disease due to misery, to poverty, to bad sanitary surroundings, to ignorance, or bad habits. On the contrary, it is a disease of the most highly civilized, the most cultured, the wealthy, and of localities which are the most salubrious. One of the characteristics of cancer is that, unless the brain is involved, it leaves intellectual power and force unimpaired. Nay, it seems that in some cases it almost increases these qualities.

No pathetic incident is more indelibly stamped on my memory than a visit made to a victim of this disease, whom I found, as I often had before, seated at his writing-table, his drawn, pallid face expressing fatigue and suffering, but still more expressive of will force and a remarkable power of endurance.

"Excuse me," he said, as I entered the room. "until I finish a paragraph that I have just begun." After a few moments he laid down his pen, saying with a sad gleam of satisfaction: "There, since your visit yesterday I have written eight pages."

After the commencement of his painful illness, stimulated by the hope of overcoming reverses and leaving his family in circumstances to which their former position entitled them, he succeeded in accomplishing a larger amount of work, and receiving a greater pecuniary reward for it, than in the history of the world was ever before acquired for literary work in so short a period of time.

Census reports are to most persons uninteresting, and the value of the two

large volumes of the last census, which relate to the vital statistics of this country, can be appreciated by but few persons ; nevertheless, I wish to call your attention especially to the importance of these books, and to the remarks in which Dr. J. S. Billings, of the United States Army, under whose direction they were compiled, sums up the conclusions which may be drawn from them, and points out the way in which such statistics should be extended, improved, and made reliable as a means of increasing our knowledge of the causes of pain and death, and of the means of destroying or of diminishing these causes.

The belief has been almost universal, both with the profession and the public, until within a comparatively recent period, that cancer has generally an hereditary origin. It is probable that no doctrine in regard to the cause of disease has given rise to so much and so causeless misery and unhappiness in the world as this. In those who have some symptoms which they suspect to indicate the beginning of this disease, suspicion becomes a conviction, if any relative of a former generation has died of cancer. They may almost be said to begin the pangs of a moral death long before it is demonstrable that physical death is inevitable from this cause. If the patients have any family history of this disease, and are suffering from any acute or chronic affection attended with symptoms which they have heard exist in cancer, the effect of this conviction is not only most depressing, but dangerously complicates conditions which otherwise might result in recovery. I have personally known many illustrations of the truth of both of my two last assertions. Again, I have more than once been asked in those pathetic tones which tell of heart-breaking anxiety : "Are my children or is my daughter doomed to suffer as I now do ?" The answer given in no equivocal words is : "The probability of such a doom for any descendant of yours is extremely small." In all the statistics which I have been able to collect, where the antecedent family history seemed to be trustworthy, I have found that the proportion of those who have had cancer, in whom some relative of a former generation is reported to have had some form of malignant disease, to be only 13.65 per cent. On the other hand, in one family which has in the present generation the largest number of victims that I have ever personally known, I have authoritative proof for asserting that no development of any form of malignant disease has ever existed in three previous generations, including collateral branches.

Before a professional audience I could give a list of names which would be regarded as conclusive as to present belief of the profession on this point. More than a quarter of a century ago, Mr. Jonathan Hutchison, whose opinions carry the greatest weight, expressed his disbelief in hereditary origin as an effective cause. Recently, that is during the past year, in a notable and most able discussion of this subject, he said : "It is utterly useless to employ such a term as hereditary transmission of cancer in such a sense as we speak of the transmission of some other diseases."

A proclivity to the disease may result from the conjunction of certain parentage, but it cannot be said to be inherited from ancestors in whom it did not exist. We may speak of cancer being hereditary as we speak of delirium tremens as hereditary, but in neither case is this transmission of the disease. Parents cannot transmit to children disease which has no existence in their own system

previous to the birth of the children, and thus it is absurd to say that a daughter has inherited the disease which her mother first developed twenty-five years after the birth of the daughter.

A cancer bacillus is as yet unknown in science, and the most recent investigations have failed to find any. But I observe that Sir James Paget, in a lecture delivered on the 11th of November, expresses the belief that micro-parasites or substances produced by them will some day be found in essential relation with cancer and cancerous diseases. But as yet there are no ascertained facts which support this belief.

In a paper read before the Academy of Medicine in 1870, I then avowed the opinion that cancer could not be regarded as an hereditary disease, but that an hereditary tendency to it often exists in those whose ancestry has been wholly exempt from it. In such it is probably developed by some local existing causes.

Cancer was regarded by Abernethy (a great authority in pathology and surgery during the early part of the present century) as being simply the local manifestation of a constitutional disease. Within the past few years a large number of the most eminent pathologists have become adherents to the doctrine that it is primarily a local disease, and that the constitutional affection is a secondary result. This is not the time or place to review the various able arguments which have been urged in favor of one or the other view, but it is a point of great importance as affecting the question of the curability of the disease. In the first place, no medicine has yet been discovered which acts specifically in retarding or curing the disease, as quinine and mercury and others do certain specific diseases. No man has the moral right to administer any drug without some well defined view of the end which he wishes to accomplish and a well grounded belief that the drug he selects will probably effect this result. But in cancer we do not know what primary changes are necessary in either tissue or function to prolong life or cure the disease. Even if we did know this, no drug has yet been found which experience has proved will effect these changes. So it may be positively asserted that no case of cancer has ever been proved to have been cured by medical treatment. But many cases have been arrested for months and years by surgical treatment ; and as after three years it is generally believed that the probability of recurrence is very slight, we have the right to say that many cases have been absolutely cured by total removal of the diseased tissues.

I think sufficient facts have been accumulated, especially within the past ten years, to justify the following assertions :—

Total removal of the whole diseased growth, when it is found as a distinctly limited affection, the lymphatic glands not being involved, it is highly probable will be followed by a cure.

If the disease has involved the lymphatic vessels and glands, the chances of cure are materially diminished ; but in many cases an operation has proved to be of great service in relieving suffering and prolonging life for months and in some cases from one to two or three years.

After the local disease has existed a sufficient length of time to contaminate the blood and infect the general system, a cure by an operation or by any other method is absolutely hopeless. Great progress has been made in successful

surgery within the past few years by a resort to the operation at the earliest possible period, that is, so soon as the existence of the disease can be determined.

The most recent and probably the most authoritative writer on this subject, Mr. Butlin, of London, asserts that every week of delay increases the danger of the contraction of various adhesions, of affections of the secondary glands, and of the formation of secondary growths. But duration alone is not a conclusive argument against the success of an operation; for, as the same author adds: "When long duration of a malignant tumor is associated with a very slow progress, small size, absence of serious adhesions, absence of affection of the neighboring lymphatic glands and of secondary growths, so much the more favorable is the prospect of permanent relief from operation for its removal." The question of the locality of the growth is one of great importance in forming a decision as to the necessity and probable success of removal, and will always be carefully and conscientiously weighed before a decision is made. These malignant growths may appear in any tissue of the body, external or internal, and eminent surgeons of this city, as elsewhere, have removed them with all the success anticipated from muscles, bones, lymphatic glands, the eye, the face, the lower lip, the tongue, the breast, and other external organs.

If this were a fitting opportunity, and time would permit, I am sure all present would be interested in hearing an account of such as I have a personal knowledge of, either from my own observation or from a knowledge derived directly from the operators. But such details would be inappropriate on the present occasion, and I am compelled to deny myself the pleasure of paying a just tribute to the skill and sound judgment of surgeons that we have in our city.

Dr. S. W. Gross, of Philadelphia, asserts: "The convictions are steadily gaining ground that this disease in the breast is primarily a local affection and not a constitutional one, and that these views are supported by many of the most eminent men living,—pathologists such as Virchow, of Berlin; Bilroth, of Vienna; Fersche, of Breslau; Esmarch, of Kiel; Mussbaunn, of Munich; Volkman, of Halle; Erichsen, Hutchison, Gull, Simon, Bryant, Green, and others, of London; and the late Dr. Gross, and Parker, Peters, Moore, Richardson, and others, in the United States has shown by the statistics of his practice, and that of others, the usefulness and success of the surgical removal of the disease."

But as I have said before, removal of the disease by operation is not restricted to external organs, for many operations for removal of internal organs have been performed with all the success that could be anticipated, although it must be added there have been many failures. On Nov. 14th, three weeks ago, I was present when one of the Medical Board of this Hospital performed one of the most difficult operations ever attempted in surgery, viz., the entire removal of a most important internal organ. I had previously seen the patient and concurred in the opinion that the operation was imperatively necessary, and that it offered a fair promise of success. I may add that the opinion of the operator and myself was given independently, each without the knowledge of the other. The patient, as I have learned within a few days, has had no unfavorable symp-

toms which have retarded her convalescence. It is possible that she may hereafter escape any return of the disease. It is certain that her life has been prolonged, and that she has been saved from months or perhaps years of suffering which would have soon ended her days. A fair number of cases have been reported in which such results have been attained. And yet so late as fifteen years ago, any proposal to attempt such an operation would have been condemned by the universal sentiment of the profession; and if it had been attempted and resulted in failure, the public would have denounced the operator as a reckless, unscrupulous butcher, who had no conscience as regards the result to his patient, but simply sought personal glory in the éclat of having performed a wonderful operation. All of us have before heard such language applied to surgeons.

The case which now commands the most universal sympathy and interest in all nations of the world is that of the Crown Prince of Prussia. It is an unparalleled event in history that three men, two of whom had been at the head of the government of their respective nations, and the third, whose probable inheritance was an empire, should each have been victims to malignant disease in contiguous localities, differing only in some minor details, at the same period in the world's history. In the case of President Grant, the locality of the malignant growth was such that it was decided by most competent authority that from the beginning a successful removal by surgery was not practicable, as the danger from such an attempt would be much greater than the probability of any benefit. During the illness of Gen. Grant I received a letter from the brother-in-law of Dom Ferdinand, ex-King of Portugal, and his attending surgeon, detailing the history and description of the case of the ex-King, in whom malignant disease had also appeared in the mouth, very near to but not exactly in the same site. From the description given the conviction was irresistible to my mind that it would be impossible, by any surgical procedure, to remove the whole of the diseased tissue, and that any attempt of the kind would be attended with such danger as might be followed by immediate death, and would undoubtedly shorten the duration of his life. His death followed within a few months that of our honored ex-President. As regards the probable future of the case of the Crown Prince, none but those able men who are in attendance upon him, and who must have a knowledge of many details which are essential elements, but which it is impossible to explain to the world, are competent to form or express any opinion of value. In general terms, I may say that his general health is reported to be very good; that the progress of the disease appears to be slow as compared with some cases I have seen, and I may add, if it be decided by his medical advisers that partial or entire excision of the larynx should be performed, we have abundant evidence that in a certain number of cases both of these operations have prolonged life to a period when the probability of recurrence is very small. In some cases entire excision has saved life for a length of time that gives great encouragement for hoping that the ravages of this terrible disease have been arrested. Two such happy results have been reported in this country and several abroad. Dr. Roswell Park, of Buffalo, in June, 1885, removed the entire larynx on account of the existence of this disease in a patient who was himself a medical man. In a letter dated Nov. 22d,

he writes to me : " The doctor has a number of relatives in Buffalo, and as I frequently see one or more of them, I am kept pretty well informed as to his condition. My latest news is so recent as last week, and to the effect that he is as well as ever."

It must be obvious that all new and important operations are followed by a progressive success in their results, as the methods of operating are improved in their details, and as the after-treatment necessary becomes better known. The percentage of successful results increases in a ratio in proportion to the experience acquired by the increasing number of the operations. Indeed, I may add that it is my conviction that the progressive number of cures of this terrible curse to humanity is in a more rapid ratio than the progressive increase of the frequency of the disease.

Need I say more, in the light of the past, to point out what may be hoped for in the future from such a Hospital as this, under the devoted zeal of the active staff, whose ability, competency, and faithfulness to their duty have already been demonstrated in other positions. Can any one have a doubt as to the probable service to humanity which will result from the careful observation and study by such competent men of details that can never be acquired except in a large hospital ?

I question whether any, even the most sanguine, has more than a feeble conception of the benefit to the victims of the disease to be here treated, and to thousands of others, that will result from the opening of this Hospital.

At the conclusion of Dr. Barker's address the President called upon Dr. William H. Draper, who said :

ADDRESS OF DR. DRAPER.

The inauguration of a new hospital must necessarily inspire more or less painful emotion. It is always an occasion of solemn interest, because it reveals and emphasizes the ills and perils which afflict humanity. It crystallizes, so to speak, the miseries of disease. It concentrates the attention upon an accumulation of physical woes and mental anguish in a way to appall sensitive and sympathetic natures and to make the stoutest hearts despondent in the face of misfortunes they are often helpless to relieve. But happily the instinct which impels us to protect ourselves and each other from the perils which beset us in this life is so strong that it manifests itself not only in individual conflict with the dangers that threaten our existence, but in the organized warfare which we carry on with the scourges which afflict the race. In this organized warfare the hospital is the most important of the battle-fields. Here we find the forces of disease gathered, and arrayed against the powers which the advances of human knowledge have furnished to antagonize them. It is for this reason that the science of disease and the art of healing command universal interest, and as the struggle which develops them is carried on with the systematic discipline and the organized methods which we find in hospitals, it enlists universal sympathy. There are no public institutions which are more sure of support, because they appeal at once, by their practical beneficence, to the highest intelligence and the most generous emotions.

The motives which led to the establishment of this Hospital are especially interesting, as showing how an intelligent public sentiment keeps pace in the direction and extent of its charities with the progress which science is making in its conflict with disease. The classification of human ills, based upon the daily increasing knowledge of their causes, and the improvement in technical skill developed by special experimental efforts for their cure, have aroused popular attention to the importance of encouraging the specialization which is the dominant feature of the science of medicine to-day. The truth of this statement is illustrated in the number and prosperity of the hospitals which have been established in this country, and all over the civilized world, within the past twenty-five years for the study and treatment of special classes and varieties of disease.

The idea that a direct and organized effort should be made to stay the ravages of cancer found its birth in the public sentiment inspired by the practical benefits which had resulted from the scientific method of contending with other diseases. And the idea was no sooner born than it commanded general attention and generous encouragement.

It is not yet four years since the humane thought found expression that something might be done to emphasize and strengthen the efforts towards the mitigation of the terrors of this fatal scourge by affording to medical and surgical skill a special field whereon to wage a close and determined warfare with it. To-day you behold this substantial, fit, and well-equipped building, with a staff of distinguished physicians and surgeons ready to devote their earnest efforts to diminish the sufferings of this terrible disease and to help as far as possible towards the efforts which are being made all over the world to determine its cause, to stay its progress, and possibly to effect its extermination.

The friends of this institution need no assurance of the immediate benefits which will result to all who seek its succor.

The Hospital itself presents every possible advantage which can come from perfect construction, cheerful environment, and even luxurious accommodation. It will doubtless be administered on the part of its Managers with a liberal consideration for the needs and comfort of the patients, and with all the skill and attention on the part of the medical staff which the latest advances in science can suggest.

But you may reasonably ask what are to be the remote consequences of the establishment of this Hospital? What are the prospects of our attaining deeper insight into the causes of cancer, and greater skill and success in its treatment, from the opportunities of observation and experience which will be afforded here? These are questions which no man can answer. But remember, they are questions which at one time it would have been considered foolishness to ask. The very fact that it has entered into the minds of men to seek the solution of problems like these, gives us reason to hope that they may be solved. This hope is encouraged by what has already been accomplished in the solution of similar problems through the practical application of discoveries in science.

Recent investigations show that many of the diseases which have been supposed to be constitutional in their origin and the result of inherent and transmitted tendencies are in reality parasitic in their nature, and determined by definite, tangible, and demonstrable germs. These germs are planted in our

bodies through the air we breathe, the clothes we wear, the water we drink, and the food we consume. This has been definitely proved of some of the more acute scourges of humanity, like cholera and typhoid fever; it is true of consumption and leprosy, and recent investigations lead us to hope that it may be true of cancer.

Surely it is a great point gained in any conflict with the powers of darkness if we can see and define our enemy. It is not clear how far the discovery that cancer depends upon a parasitic germ, should it be made, is going to affect our ultimate success in diminishing its ravages. There would certainly be one interesting result of this addition to our knowledge of the pathology of cancer—it would justify in the most complete manner the necessity of early surgical interference whenever it is possible. This of itself would be a great gain, and it is probable that this is one of the ways in which this Hospital is going to illustrate its beneficent work. In its out-door department a great many cases will come under observation in their earliest stages, when prompt surgical aid will certainly save needless suffering, and prolong, if it does not rescue, many lives.

In this way the institution will accomplish each year of its existence enough good to justify its liberal support. This much requires no prophecy. As to the greater benefits which are to come from its establishment, how far its contributions to the treatment and cure of cancer may make this Hospital a recognized force in the emancipation of humanity from this relentless disease, we can only express the hope that its destiny in this respect may realize the expectations of its most enthusiastic friends.

ADDRESS OF REV. DR. HALL.

Rev. Dr. Hall, who was to make the last address, said that at that late hour, and after the interesting and authoritative information given them, he would content himself with the statement of three thoughts, and he would make the statement as concise as possible. In the first place there is, in certain quarters, a strong disposition to censure the well-to-do as such, as if the very possession of means, however acquired or however employed, implied wrong on the part of the owner. Every such institution as this constitutes an answer, in part at least, to those criticisms, and is fitted to weaken those unhappy feelings that threaten to divide society and produce irritation where there should be mutual trust and mutual helpfulness.

The second point respects one class of results from the working of this institution. Observations on the mysterious malady for the sufferers by which it has been erected, have necessarily been more or less desultory, and difficult of collection and comparison. We may surely hope that under the eyes of capable physicians observing and classifying observations regularly made, and in the most favorable circumstance, there will come out conclusions the practical effect of which will be to render the disease less common or more manageable. Who that has seen its victims can refrain from praying for this incidental gain from this benevolent work? And, finally, let us hope that the working of this Hospital in the coming years will dispel that vague, indefinite feeling regarding this form of human suffering which so frequently leads to its concealment, or

its being spoken of with "bated breath." "I can say," said the speaker, "and with the deepest feeling, that some of the best, the gentlest, the most Christian people I have ever known have, in this way, passed from this brief life into the rest and peace promised to God's children. Within the last year a gallant British officer, who in military life and in civil won the highest places, and an Irish judge, than whom I never knew a juster or a nobler man, so passed upward : and their patience, gentleness, and hope, as I stood by them in the time of critical suffering, were as noble and impressive as any thing I ever saw. It will be no mean gain if unreasoning feeling on this matter be dissipated, and the working of this great and benevolent institution, I do not doubt, will have happy influence in this direction. We cannot but wish and pray that the blessing of Him who loved us and suffered for us may rest on those who watch the outlay of their means on this new form of relief to human misery ; and when its founders are all gone, yet blessed will be their memory."

After Dr. Hall's remarks, the audience joined with the choir in singing the hymn "With One Consent" (Old Hundred).

FROM THE ONE HUNDREDTH PSALM.

With one consent let all the earth
 To God their cheerful voices raise ;
 Glad homage pay with awful mirth,
 And sing before Him songs of praise.

Convinced that He is God alone,
 From whom both we and all proceed,
 We, whom He chooses for his own,
 The flock that He vouchsafes to feed.

For He 's the Lord supremely good,
 His mercy is forever sure ;
 His truth, which always firmly stood,
 To endless ages shall endure.

The Benediction was then pronounced by the Right Rev. H. C. Potter, D.D., and the audience dispersed to inspect the Hospital building.

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MEMORIAL.

THE NEW YORK CANCER HOSPITAL,
January 17, 1888.

The following memorial notice of Mrs. John J. Astor, prepared by Mr. John E. Parsons, President of the Hospital, in accordance with resolution passed at the meeting held December 20, 1887, was this day presented, and directed to be placed upon the minutes.

On January 5th I received from Mr. Astor his check for \$25,000 "for the endowment of five free beds in perpetuity at the New York Cancer Hospital, in memory of Charlotte Augusta Astor, wife of John Jacob Astor." This announcement makes a fitting beginning to the memorial notice to be placed upon our minutes, which I have been instructed to prepare.

A well rounded life, which has met every duty as it came along, furnishes little in the way of incident. It is the termination of such a life and the vacant space it leaves by which best can a judgment be formed of the measure of its importance. Of this Mrs. Astor was a striking illustration. She lived under the observation of all. She died in our midst. We were conscious of the important duties which she discharged. We knew the time and interest which she gave to the innumerable demands which the needs of a city like this create. We were witnesses of the warmth of her heart and of the wise counsel which she brought to the aid of the work which engaged her attention. But it was so much a matter of course to expect this from her, that we took it for granted. We must look back to form an opinion of the loss which her death has occasioned. We then recognize how complete her life was, and realize that it is rather to be estimated in the fulness of all its harmonious proportions than to be judged by any special or exceptional detail.

Mrs. Astor was born in the city of New York, on February 27, 1825. Her father, Thomas Stanyon Gibbes, belonged to a prominent South Carolina family. Prior to 1825, he established his residence in New York. Here he continued to live down to his death. Here his children were brought up. Mr. Gibbes was a gentleman of position, of intelligence, and of abundant means. It goes without saying that from her earliest life Mrs. Astor enjoyed every advantage which was possible. What distinguished her was the use which she made of opportunities common to her with many others. She was endowed naturally with a mind of unusual power. She was gifted with a taste for literature, for music, and for the fine arts. She readily acquired the accomplishments of

refined and cultivated life. She possessed excellent natural judgment. From the beginning she devoted herself to studies and pursuits more serious than is usually the case with those of her class.

On December 9, 1846 she was married. The important position which Mr. Astor filled, called for the discharge of important duties by her. In such a position social claims are imperative. It was a necessity that much of Mrs. Astor's life should be devoted to their discharge. Notwithstanding this, she continued to gratify her love of literature, of music, and of art. To read the current books, to maintain her proficiency in music, to keep herself informed about the many subjects which occupied public attention, necessarily involved much time. Aside from lighter accomplishments Mrs. Astor was interested in science, in the development of human thought, and in studies of a practical and earnest kind. Her acquaintances were among persons eminent in art, in literature, in public life, and in science. She enjoyed their society ; she met them on equal ground. Naturally she was ambitious to keep herself informed on the great variety of subjects in contact with which she was brought, and that she did so in no superficial way is well known to all who had the pleasure to enjoy conversation with her.

In 1848 her son, the present Mr. William Waldorf Astor, was born. To train and educate him for the important position before him, was a pleasure and a duty. To it she applied herself with the conscientiousness which characterized all her acts, steeling herself against permitting a mother's love for an only son to interfere with that son's welfare.

And underlying this attention to social, friendly, and family duties, was a keen and lively interest in every scheme and undertaking which looked to the improvement of the human race. It is easy for those who are rich to give money. It is not difficult for them to give a portion of their time. Mrs. Astor was not satisfied with the expenditure of time and money in her work for the poor and degraded, the unfortunate and the erring. Knowledge of their condition, study of the best means by which to improve it, and accurate understanding of the diseases from which humanity suffers, and of the best mode of alleviation, were in her view required to enable her to discharge the philanthropic and benevolent work which she undertook. Whether it was a question of the poor children of this city, or the degraded Indians of the Western plains, whether of those suffering from the consequences of their own crimes, or the unfortunate persons of her sex who were victims of the diseases to which they are especially subject, Mrs. Astor gave to her work in their behalf an accurate knowledge of their condition and of the best mode for its relief.

In 1872 she became a member of the Board of Managers of the Woman's Hospital. She subsequently declined to become its president, but she continued, until the condition of her health forbade, to be active and earnest in the work of that institution. Out of it grew her special relation to this Hospital. The story of the gift with which was constructed the Astor Pavilion has been told before. During all the time that Mr. Astor's offer for a cancer pavilion in connection with its work stood open for acceptance by the Woman's Hospital, Mrs. Astor took a quiet part in the discussions ; she was a member of the committee appointed to consider the subject ; but never did she betray by word or look the interest which she felt that the gift should be accepted. Out of its

refusal came the beginning of our Hospital. It must always be an occasion of regret that Mrs. Astor's health prevented her being present at the laying of the corner-stone, or ever visiting the building. But although she was denied the opportunity of any outward display of her interest, the Hospital and its concerns were none the less near her heart. The plans, as they were prepared, were submitted to her examination. In all the hurry of her departure on her last visit to Europe, she gave time to go over them thoroughly and to make careful practical suggestions, and as the Hospital now stands, it represents the result of her matured knowledge upon the subject of that mode of hospital construction best adapted to produce the happiest results.

From the laying of the corner-stone down to her death, Mrs. Astor's health gradually failed. Long before the time came to open the Hospital, we knew that neither would she be able to be present, nor was she likely ever to see the practical results of the beneficent bounty which she had inspired. Her death came on December 12, 1887. It may be said that the death of no private person has caused more regret or called for wider sympathy. It is not only in the homes of the rich, among those of her own class, that Mrs. Astor will be missed. She was a friend of the poor, and they knew it. They have sustained a loss which it will be difficult to repair. The outcast and the degraded came within the reach of her earnest and active interest. They have been bereft of one who was always working to improve their condition. Human suffering in every form provoked her sympathy, and prompted her to active and intelligent effort for its relief. The innumerable number of those who suffer have met with an irreparable loss. The work of the church to which she belonged has been deprived of a conscientious and efficient laborer. She will be missed in every public enterprise which aims at the improvement of New York. Her most appropriate monument is in the esteem, affection, and regard in which she was held by all who knew her.

In a notice of Mrs. Astor's death, written by her friend, Bishop Potter, and published in the *Churchman*, this incident is related: "The writer well remembers driving up Fifth Avenue on that hot day in August, a few years ago, when Grant was borne to his tomb. On either side, the long procession was flanked by closed houses, with only here and there an open window, indicating thus the almost universal absence of their owners from their homes. But a marked exception was the residence of Mrs. Astor, whose windows were crowded with shop-girls and women bidden by its thoughtful hostess to gather there and view the memorable pageant, and as her guests to enjoy a privilege once eagerly longed for and most difficult of attainment. She herself was absent at her summer home by the sea; but even then her thoughts were with her less favored friends who were prisoners in the town; and a delicate forethought and personal painstaking gave to these, not only the pleasure of a rare spectacle, but the rarer pleasure that they were kindly and generously remembered."

Little remains to be said. Within the short time since the Hospital has begun, it has sustained the loss of two of its most valued friends. Mrs. Cullum and Mrs. Astor were cousins. Interest in the treatment of cancer, brought them together in the formation of the Hospital. It is an appropriate memorial of both. As long as its buildings last, as long as its beneficent work goes on, it will be a memento of them and of the good deeds by which they are endeared.

FORM OF BEQUEST.

I give and bequeath to the New York
Cancer Hospital in the city of New York the sum of
dollars.